

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>11/27/02</u>		2 Serial/Patent # <u>10/03/688</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED							
<input checked="" type="checkbox"/>	Filing		\$ <u>678</u>							
<input type="checkbox"/>	Amendment		\$							
<input type="checkbox"/>	Extension of Time		\$							
<input type="checkbox"/>	Notice of Appeal/Appeal		\$							
<input type="checkbox"/>	Petition		\$							
<input type="checkbox"/>	Issue		\$							
<input type="checkbox"/>	Cert of Correction/Terminal Disc.		\$							
<input type="checkbox"/>	Maintenance		\$							
<input type="checkbox"/>	Assignment		\$							
<input type="checkbox"/>	Other		\$							
		7 TOTAL AMOUNT OF REFUND	\$ <u>678</u>							
10 REASON:		8 TO BE REFUNDED BY:								
<input type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/>	Treasury Check							
<input type="checkbox"/>	Duplicate Payment	<input type="checkbox"/>	Credit Deposit A/C #:							
<input type="checkbox"/>	No Fee Due (Explanation):	9	<table border="1" style="display: inline-table;"><tr><td></td><td></td><td>--</td><td></td><td></td><td></td><td></td></tr></table>			--				
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11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: <u>Rita White</u>		TITLE: <u>Legal Examiner</u>								
SIGNATURE: <u>Rita White</u>		PHONE: <u>305-3668</u>								
OFFICE: <u>DOFO</u>										

THIS SPACE RESERVED FOR FINANCE USE ONLY:										
APPROVED: <u>Harry Huggins</u>		DATE: <u>11-27-02</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: